

FILED WITH LRC TIME: <u>2 p.m.</u> JUL 20 2012 Donna Little REGULATIONS COMPILER
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STATEMENT OF EMERGENCY
201 KAR 9:001E

(1) This emergency administrative regulation establishes required definitions used in KRS 218A.172.


(2) In order to comply with HB 1 from the 2012 Special Session of the General Assembly, which requires the Kentucky Board of Medical Licensure to establish definitions used in KRS 218A.172, it is necessary to promulgate this emergency administrative regulation.

(3) This emergency administrative regulation shall be replaced by an ordinary administrative regulation to be concurrently filed with the Regulations Compiler.

(4) The ordinary administrative regulation is identical to this emergency administrative regulation.


STEVEN L. BESHEAR, GOVERNOR

7/20/12
DATE


PRESTON P. NUNNELLEY, PRESIDENT
KENTUCKY BOARD OF MEDICAL LICENSURE

7/20/2012
DATE

1 General Government Cabinet

2 Kentucky Board of Medical Licensure

3 (Emergency Administrative Regulation)

4 201 KAR 9:001E. Definitions for terms used in KRS 218A.172.

5 RELATES TO: KRS 311.530-311.620, 311.990, 218A.172

6 STATUTORY AUTHORITY: KRS 311.565(1)(a)

7 NECESSITY, FUNCTION, AND CONFORMITY: KRS 311.565(1)(a)

8 authorizes the board to promulgate administrative regulations to regulate the
9 conduct of its licenses. This administrative regulation establishes the definitions
10 for terms used in KRS 218A.172.

11 Section 1. Definitions. The following terms used in KRS 218A.172 are
12 defined in the following manner:

13 (1) "Query the electronic monitoring system" means, in the setting of a
14 licensed hospital, long term care facility or surgical center:

15 (a) the admitting physician, admitting the patient for observation, inpatient or
16 outpatient purposes, obtaining and reviewing the KASPER immediately prior or
17 promptly after the patient's admission to the hospital;

18 (b) the admitting physician placing the KASPER report into the patient chart
19 for use by all practitioners in the hospital for that patient during that specific
20 admission;

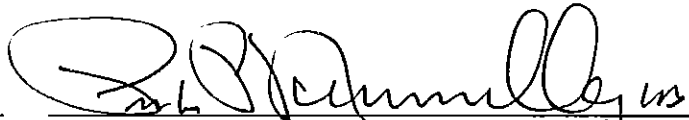
1 (c) each practitioner reviewing the KASPER report in the patient chart before
2 prescribing controlled substances during the course of that specific admission;
3 and,

4 (d) the discharging practitioner reviewing the KASPER report in the patient
5 chart before prescribing controlled substances for up to seventy-two (72) hours
6 upon the patient's discharge from the hospital.

7 (2) "During surgery" means the seventy-two (72) hour period immediately
8 following surgery if the controlled substance is prescribed or the forty-eight (48)
9 hour period immediately following surgery if the controlled substance is
10 dispensed for the treatment of pain resulting from the surgery, whether the
11 surgery is performed on an inpatient or outpatient basis.

Adopted:

7/20/2012
DATE


PRESTON P. NUNNELLEY, M.D., PRESIDENT
KENTUCKY BOARD OF MEDICAL LICENSURE

REGULATORY IMPACT ANALYSIS AND TIERING STATEMENT

Contact Person: C. Lloyd Vest II, General Counsel, 310 Whittington Parkway, Suite 1B, Louisville, Kentucky 40222: (502) 429-7150.

- (1) Provide a brief summary of:
 - (a) What this administrative regulation does: This administrative regulation establishes the definitions for terms used in KRS 218A.172.
 - (b) The necessity of this administrative regulation: It is necessary to establish the definitions for terms used in KRS 218A.172.
 - (c) How this administrative regulation conforms to the content of the authorizing statutes: This administrative regulation acts specifically to establish the definitions for terms used in KRS 218A.172.
 - (d) How this administrative regulation currently assists or will assist in the effective administration of the statutes: This administrative regulation acts specifically to establish the definitions for terms used in KRS 218A.172.
- (2) If this is an amendment to an existing regulation, provide a brief summary of:
 - (a) How the amendment will change this existing administrative regulation; Not Applicable.
 - (b) The necessity of the amendment to this administrative regulation; Not Applicable.
 - (c) How the amendment conforms to the content of the authorizing statutes; Not Applicable.
 - (d) How the amendment will assist in the effective administration of the statutes. Not Applicable.
- (3) List the type and number of individuals, businesses, organizations, or state and local governments affected by this administrative regulation: This is a new administrative regulation that will affect all physicians licensed in the Commonwealth of Kentucky that prescribe controlled substances.
- (4) Provide an analysis of how the entities identified in question (3) will be impacted by either the implementation of this regulation, if new, or by the change, if it is an amendment, including:
 - (a) List the actions that each of the regulated entities identified in question (3) will have to take to comply with this administrative regulation or amendment: Physicians will not have to take any required action to comply with this regulation.
 - (b) In complying with this administrative regulation or amendment, how much will it cost each of the entities identified in question (3): The Kentucky Board of Medical Licensure will not charge a fee for compliance with regulation.

- (c) As a result of compliance, what benefits will accrue to the entities identified in question (3): Physicians will have definitions for the terms used in KRS 218A.172.
- (5) Provide an estimate of how much it will cost the administrative body to implement this administrative regulation:
- (a) Initially: None
 - (b) On a continuing basis: None
- (6) What is the source of funding to be used for the implementation and enforcement of this administration regulation: None.
- (7) Provide an assessment of whether an increase in fees or funding will be necessary to implement this administrative regulation, if new, or by the change if it is an amendment: No increase of fees or funding will be necessary.
- (8) State whether or not this administrative regulation establishes any fees or directly or indirectly increases any fees: This administrative regulation does not establish any fees nor does it directly or indirectly increase any fees.
- (9) TIERING: Is tiering applied? (Explain why or why not)

Tiering was not appropriate in this administrative regulation because the administrative regulation applies equally to all those individuals regulated by it.

FISCAL NOTE ON STATE OR LOCAL GOVERNMENT

Regulation Number: 201 KAR 9:001E

Contact Person: C. Lloyd Vest II

Phone number: 502/429-7150

(1) What units, parts or divisions of state or local government (including cities, counties, fire departments, or school districts) will be impacted by this administrative regulation? None

(2) Identify each state or federal statute or federal regulation that requires or authorizes the action taken by the administrative regulation.
KRS 311.565(1)(a), 218A.172

(3) Estimate the effect of this administrative regulation on the expenditures and revenues of a state or local government agency (including cities, counties, fire departments, or school districts) for the first full year the administrative regulation is to be in effect. None

(a) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fire departments, or school districts) for the first year? None

(b) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fire departments, or school districts) for subsequent years? None

(c) How much will it cost to administer this program for the first year? None

(d) How much will it cost to administer this program for subsequent years?
None

Note: If specific dollar estimates cannot be determined, provide a brief narrative to explain the fiscal impact of the administrative regulation.

Revenues (+/-):

Expenditures (+/-):

Other Explanation: